



Graduate Studies
Advancement to Candidacy

GSO1

Name		Student ID Number	
Local Address		Telephone Home/Cell	
Permanent Address			
Email Address			
Master's Program	Master's in Public Administration		

Proposed Title and Short Description of Thesis/Project

Special Requirements for Advancement

Date

Completed coursework in preparation for Culminating Experience	
--	--

Writing Proficiency Requirement (please select one)

Date

<input type="checkbox"/> WEPT Passed	
<input type="checkbox"/> Writing sample assessment	

In signing this document, I agree to accept the responsibility of preparing a manuscript that meets the standards of the supervising committee and the University [as outlined in the Guidelines for Master's Theses and Projects published by the university].

Student Signature (Digital Signature Acceptable)	Date

In signing this document the committee agrees to accept the roles and responsibilities assigned to the task of acting as evaluators of the quality and substance of this student's final project [as outlined in the Guidelines for Master's Theses and Projects published by the university].

Committee	Name (Typed)	Signature (Digital Signature Acceptable)	Date
Chair			
Second Member			
Third Member			
Fourth Member			
Graduate Coordinator			

For Graduate Studies Office Use Only:

Review and Data Update:	Signature	Date
Graduate Studies Clearance		
Status Updated to REC3 in Peoplesoft		